

MSIG (WINNER): 26/4/18

**Letter of Claims
Request for direct settlement.**

We are submitting a claim on behalf of our customer HO CHING SUM (LOW YENG TECK. 96726727)
NRIC _____ insured of vehicle SDV 503C against
your insured vehicle number SR 5125L (AIG)
On the accident dated on 29.3.18 (ddmmyyy) along UPP. THOMSON
RD IN DIRECTION OF GISHAN.

Dated this 03 APR 2018 (day) of _____ (month) 2018.



Charmaine Kong
Volkswagen Group Singapore
Accident Claims Dept.
charmaine.kong@vw.com.sg
DID : 63057176/ 63057299
HP: 92361399

PDI TUAS

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HO CHING SUM
3 SPRINGLEAF RISE
Singapore, 787983
Singapore

Phone No.
Fax No.
E-Mail

VAT Registration No. M20098505-2
Tax No. 199101494Z

Service Quote

Customer No. CV037860
Quote No. SER/QUO/1800540
QuoteDate 29/03/18
Salesperson Anthony Yong
Page 1

THIS IS NOT AN OFFICIAL TAX INVOICE

Make	Model Description	Mileage	Service Advisor
Volkswagen Passeng	GOLF A7 1.4 CL 92 (DSG)	14	Cheong Pearlyn
License No.	VIN	Initial Registration	Sales Advisor
SDV503C	WVWZZZAUZH16415	30/06/17	Anthony Yong
Engine Code	Labor Type	Engine No.	Model Code
	1T	CZC 146055	5G13HZ

No.	Description	Qty.	UoM	Unit Price	Amount
P B&P ALEX LABOUR	LABOUR FRONT	3	UNIT		2,520.00
P B&P ALEX LABOUR	LABOUR REAR	4	UNIT		3,360.00
P B&P ALEX LABOUR	RE+REINSTALLED REAR WSREE	1	UNIT		840.00
P B&P ALEX LABOUR	TRANSFER BOOT LID PARTS	1	UNIT		840.00
P B&P ALEX PAINT	SPRAY PAINT	3	UNIT		2,400.00
P B&P ALEX PAINT	SPRAY PAINT	4	UNIT		3,200.00
P B&P NUMBER PLATE	B&P NUMBER PLATE -NETT FRO	1	pcs		80.00
P B&P NUMBER PLATE	B&P NUMBER PLATE -NETT REA	1	pcs		80.00
P B&P DIAG	PROGRAMMING & CALIBRATION COMPULSORY TO DO AFTER AC	1	Time Un		480.00
P B&P MECH	CHECK WIRE HARNESS, ECU, S Nett	1	Time Un		280.00
	Sum Labor				14,080.00
P 5G0805915 9B9	FRONT LOWER SPOILER	1	Pieces		162.61
P 5G0805931	HEADLIGHT BRACE SUPPORT L	1	Pieces		30.18
P 5G0805932	HEADLIGHT BRACE SUPPORT R	1	Pieces		30.18
P 5G0807049A	FRONT BUMPER BRACKET LHS	1	Pieces		16.90
P 5G0807050A	FRONT BUMPER BRACKET RHS	1	Pieces		16.90
P 5G0807109H	FRONT BUMPER REINFORCEME Use Predecessor 5G0807109B	1	Pieces		460.54
P 5G0807217BNGRU	FRONT BUMPER	1	Pieces		999.11
P 5G0807248F	FOAM INSERT Use Predecessor 5G0807248D	1	Pieces		34.81
P 5G0807305B	BUMPER REINFORCEMENT Successor 5G0807305D	1	Pieces		629.03
	Sum carried forward				16,460.26

Payments to: - BBN: - Acc.-No.:

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HO CHING SUM
3 SPRINGLEAF RISE
Singapore, 787983
Singapore

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Fax No.
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License No.	VIN	Initial Registration	Sales Advisor
SDV503C	WVWZZZAUZH116415	30/06/17	Anthony Yong
Engine Code	Labor Type	Engine No.	Model Code
	1T	CZC 146055	5G13HZ

Continued 16,460.26

P 5G0853651G ZLL	FRONT UPPER GRILLE	1 Pieces	441.45
P 5G0853675 2ZZ	NAME PLATE TSI	1 Pieces	47.16
P 5G0853675AT2ZZ	NAME PLATE 230	1 Pieces	57.46
P 5G0853687 2ZZ	NAME PLATE GOLF	1 Pieces	60.65
P 5G0919491	SENSOR BRACKET REAR	1 Pieces	12.74
P 5G0919491	SENSOR BRACKET REAR	1 Pieces	12.74
P 5G0919491A	SENSOR BRACKET REAR	1 Pieces	12.74
P 5G0919492A	SENSOR BRACKET REAR	1 Pieces	12.74
P 5G0919493	SENSOR BRACKET	1 Pieces	12.74
P 5G0919493A	SENSOR BRACKET	2 Pieces	25.48
P 5G0919494	SENSOR BRACKET	1 Pieces	12.74
P 5G2941005E	HEADLAMP LHS	1 Pieces	929.96
	Use Predecessor 5G2941005		
P 5G2941006E	HEADLAMP RHS	1 Pieces	929.96
	Use Predecessor 5G2941006		
P 5G6807393	REAR BUMPER BRACKET LHS	1 Pieces	31.59
P 5G6807393A	REAR BUMPER RETAINER LHS	1 Pieces	31.59
P 5G6807394	REAR BUMPER BRACKET RHS	1 Pieces	31.59
P 5G6807394A	REAR BUMPER RETAINER RHS	1 Pieces	31.59
P 5G6807417APGRU	REAR BUMPER COVER	1 Pieces	996.45
	Predecessor 5G6807417ARGRU		
P 5G6807568D 9B9	REAR DIFFUSER SPOILER	1 Pieces	279.81
	Use Predecessor 5G6807568D		
P 5G6807863A	REAR CENTER STRIP	1 Pieces	58.12
	Use Predecessor 5G6807863		
P 5G6827025Q	REAR LID	1 Pieces	1,174.75
	Use Predecessor 5G6827025H		

Sum carried forward 21,664.31

Payments to: - BBN: - Acc.-No.:

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Make Volkswagen Passeng
License No. SDV503C
Engine Code
Model Description GOLF A7 1.4 CL 92 (DSG)
VIN WVWZZZAUZHW116415
Labor Type 1T

Mileage 14
Initial Registration 30/06/17
Engine No. CZC 146055

Service Advisor Cheong Pearlyn
Sales Advisor Anthony Yong
Model Code 5G13HZ

		Continued	21,664.31
P 5Q0919133 9B9	SENSOR O RING	8 Pieces	13.68
P D 002000A2	CLEANER	1 Pieces	128.14
P D 004660M2	2K GLUE	1 Pieces	159.35
P D 00920002	PRIMER	1 Pieces	27.89
P D 00950025	APPLICATOR	2 Pieces	19.38
P D 180KU2A1	2KADHESIVE	1 Pieces	89.84
P D 181802M1	ACTIVATOR	1 Pieces	25.53
P D 822150A1	BONDAGENT	1 Pieces	64.27
Sum Item			8,112.39

Sum Labor	14,080.00
Sum Item	8,112.39
Total SGD	22,192.39
7% GST	22,192.39 1,553.47
Total SGD Incl. GST	23,745.86

Explanations

P = Proportionately Charged

Payment Terms No Credit

Payments to: - BBN: - Acc.-No..:

MSIG (wimmer)
VS
ATG onf

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report 29/03/2018 16:21
Date Of Accident 29/03/2018 13:50
Exact Location Of Accident ALG UPPER THOMSON RD IN D'TION OF YISHUN
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDV503C
Insured/Policyholder
Name Of Registered Owner HO CHING SUM
NRIC No S2539361I
Email Address YENGTECKLOW@YAHOO.COM
Mobile Phone No (LOCAL) +65-96726727
Alternative Phone No OFFICE-96726727

Vehicle Particulars

Manufacturer VOLKSWAGEN
Model GOLF A7 1.4 CL 92 (DSG)
Exact Purpose for which vehicle was being used at time of accident PRIVATE

Are you claiming under your own insurance policy for repair to your vehicle? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number A 28984807 AVW
Cover Note Number

Driver

Name of Driver LOW YENG TECK
NRIC No S2502075H
Date Of Birth 14/03/1959
Occupation INDOOR
Date Of Driving Pass 17/01/1983
Driving Experience 35 YEARS AND 2 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-96726727
Fax Number (LOCAL) +65-96726727
Contact Number
Email Address YENGTECKLOW@YAHOO.COM

Address	3 SPRINGLEAF RISE
Postcode	787983
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

MORE DETAILS PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKR5135L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JENNIFER
NRIC/Passport Number	
Contact Number	96652871
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLX1729C
Vehicle Make/Model/Colour	

Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR THAM
NRIC/Passport Number	
Contact Number	87497672
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The Issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
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7. By the lodgment of this report to the Insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

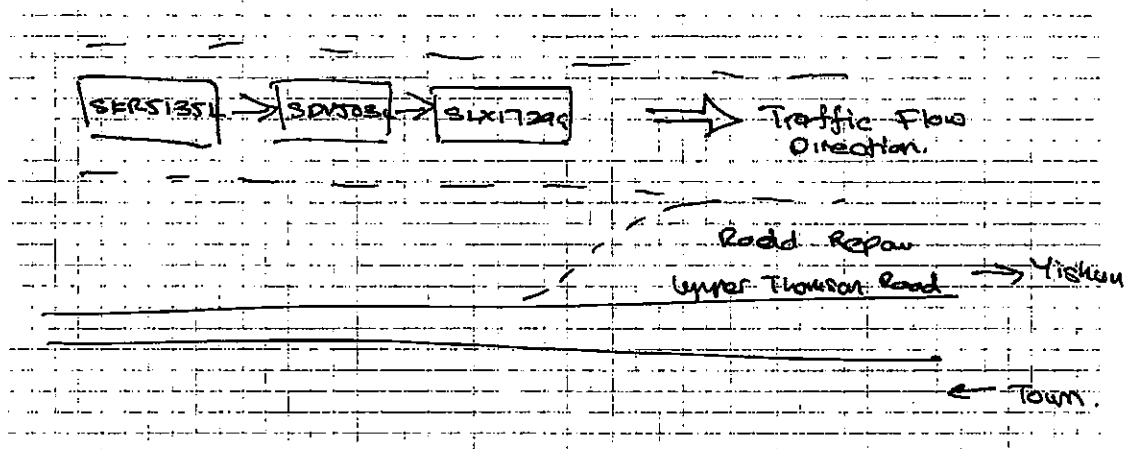
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

1. At the road repair area, a car suddenly made a left turn, causing 5KX1729C to brake hard.
2. A immediately braked hard and managed to avoid hitting 5KX1729C.
3. However, the car behind, 3KRS135L did not manage to stop in time and hit me (SDVS03C) causing me to hit 5KX1729 in front of me.
4. No injuries of any significance. Driver of 3KRS135L sustained some air-bag burns due to inflation of airbags.

Accident happened 1:50pm March 29 2018, along upper Thompson Road in direction of Gishun.
Actual location, just before bus stop. between Venus Drive and Island Club Road. -opposite Flame Tree Park.

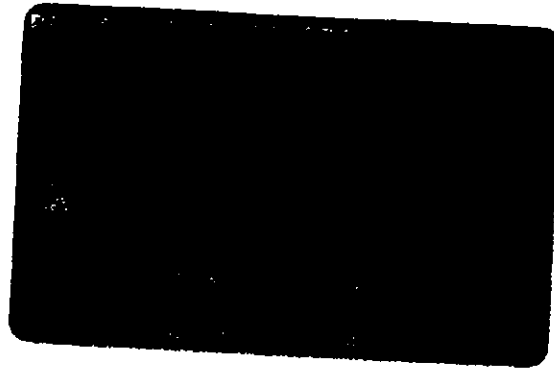
DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: _____
NRIC/FIN No.: _____



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2502075H



Name

LOW YENG TECK



劉燕德

Race

CHINESE

Date of Birth

14-03-1959

Sex

M

Country of Birth

MALAYSIA



SDV 503 C

A2898 4807 Am

\$ 500

50% Yes probable


Tel: 96726727

Email: yengtecklow@yahoo.com


Sketch Plan #4 Pg. 1



8348377



NRIC No. S2502075H



Nationality
MALAYSIAN

Blood Group Date of issue
B+ 10-02-2000

Address
**3 SPRINGLEAF RISE
SINGAPORE 787983**

Accident Photo



Accident Photo



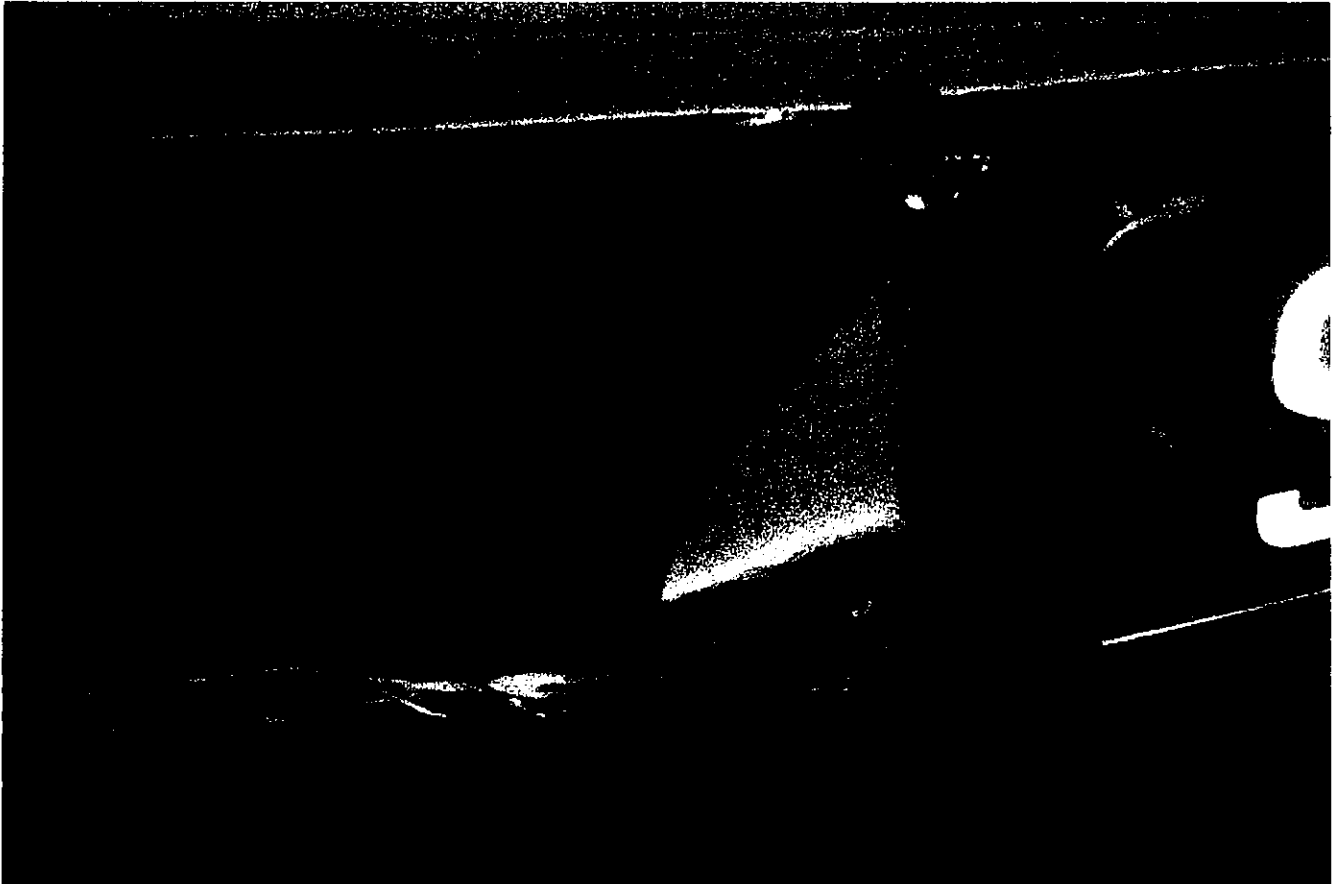
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Accident Photo



Accident Photo



Accident Photo



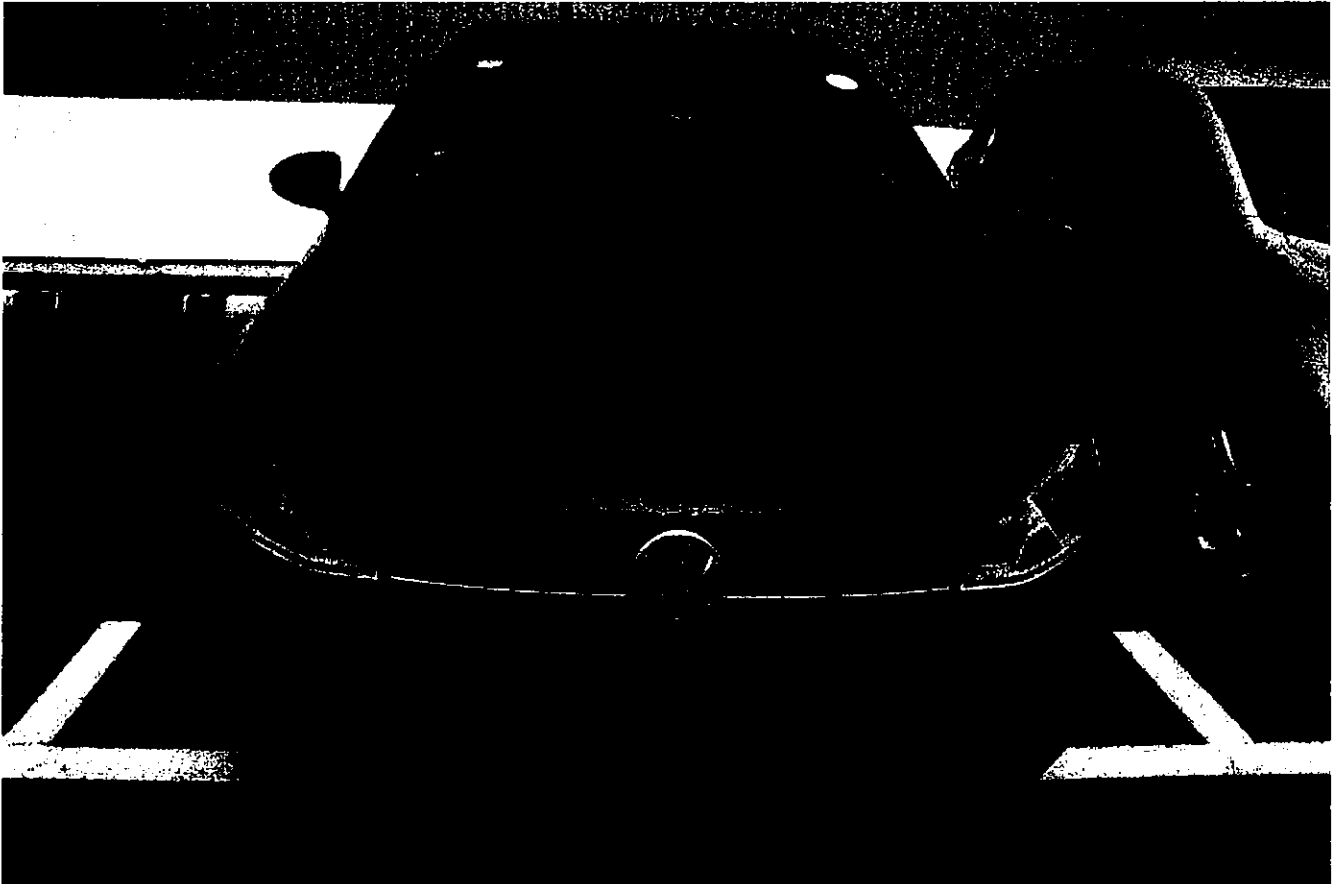
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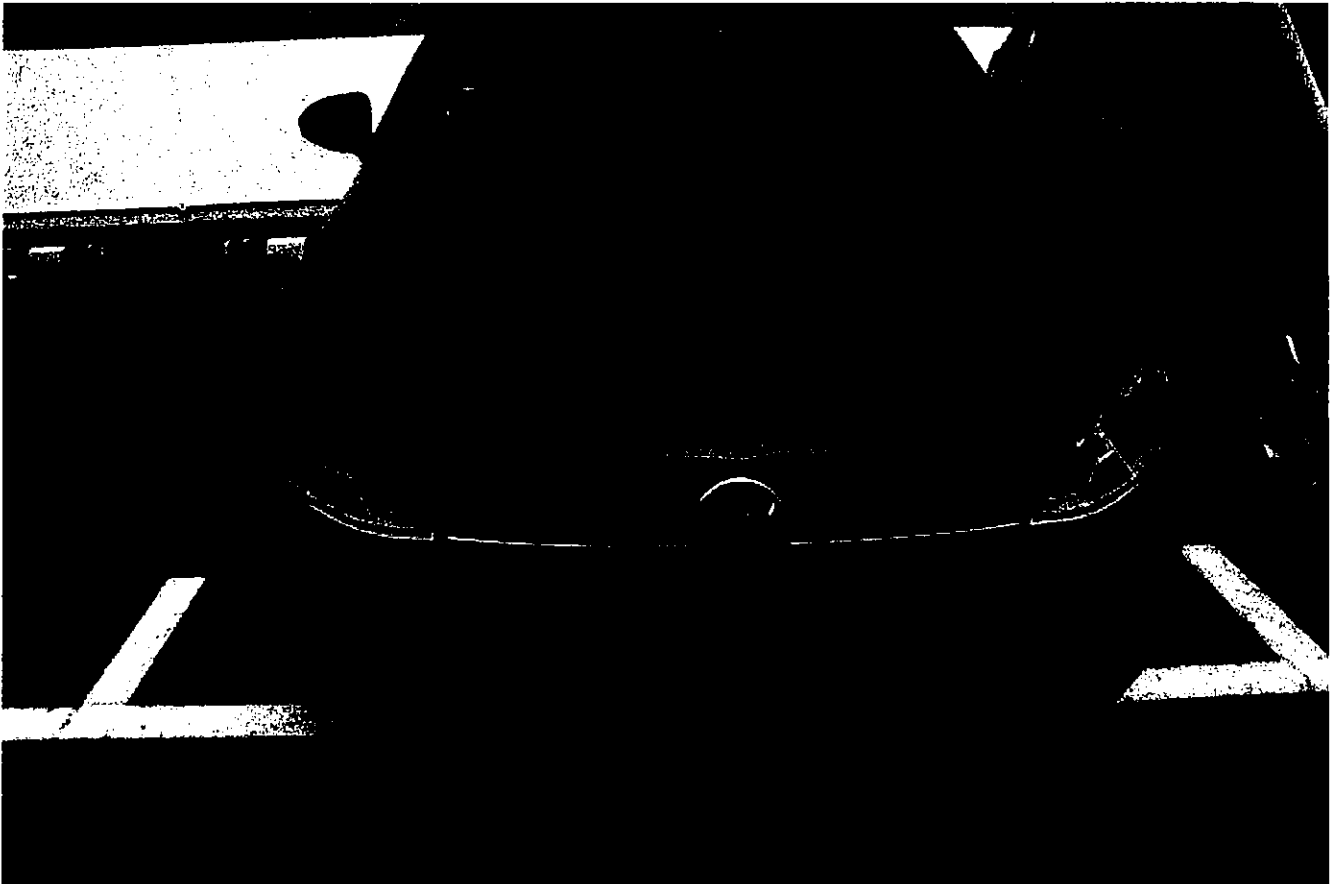
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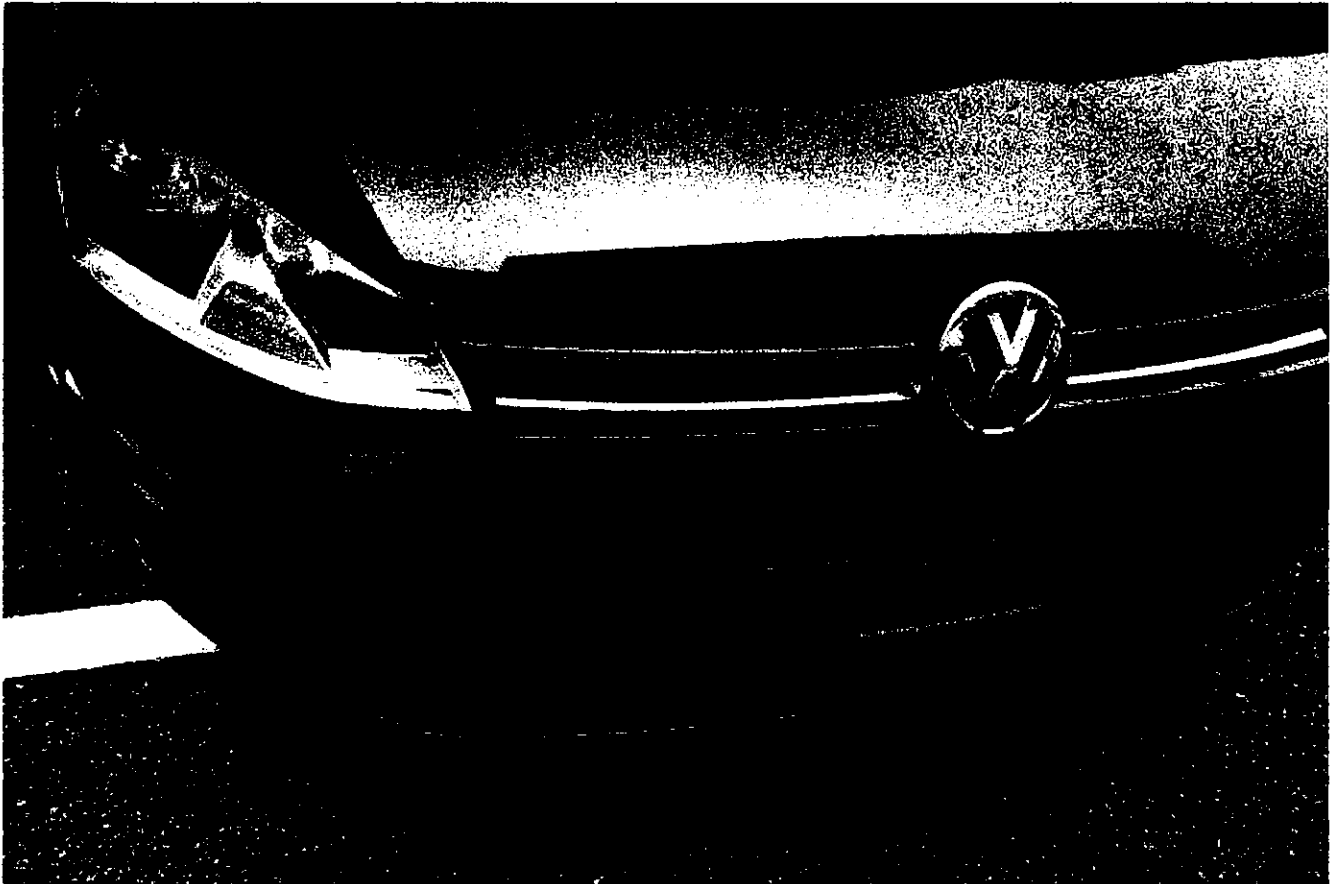
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Accident Photo



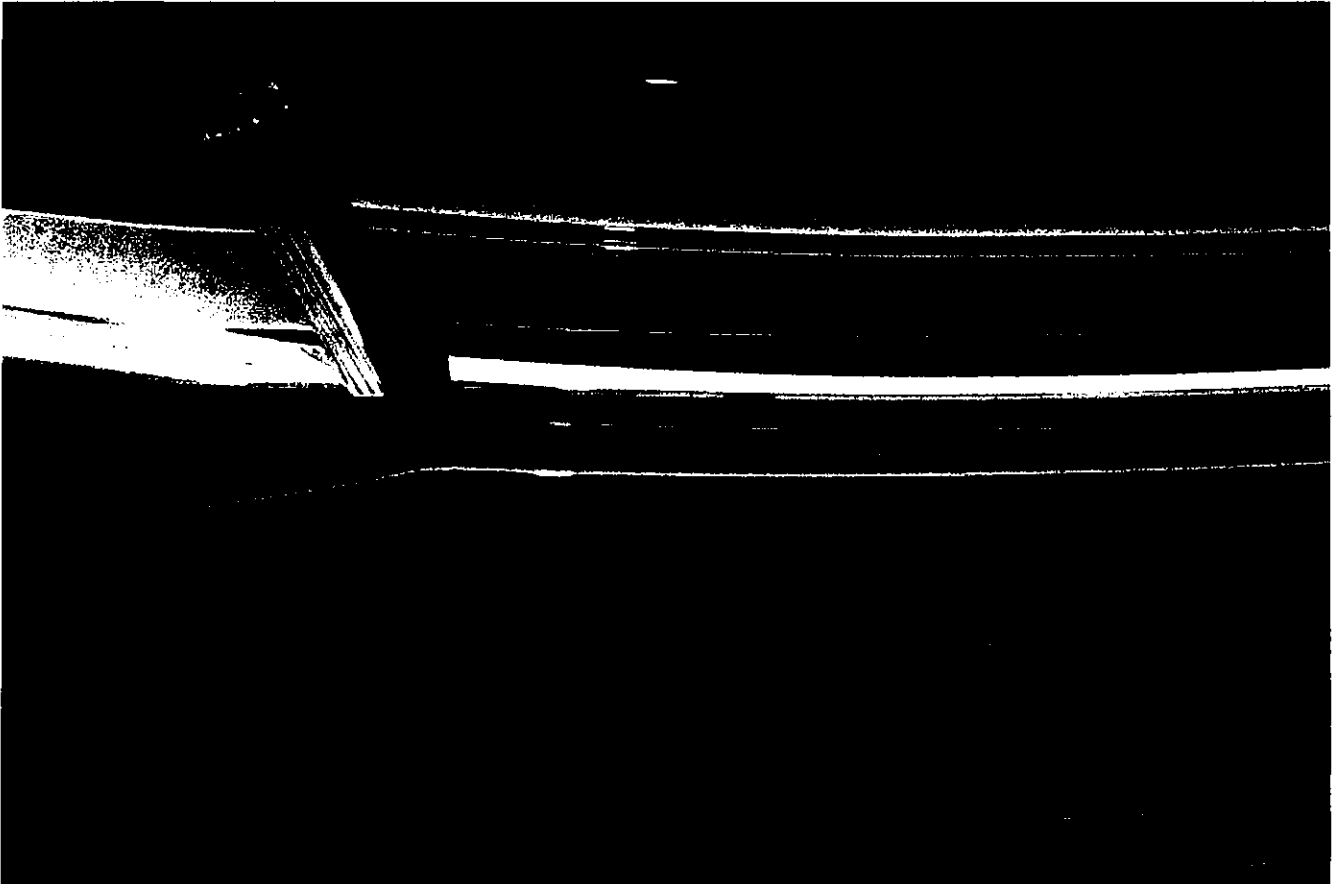
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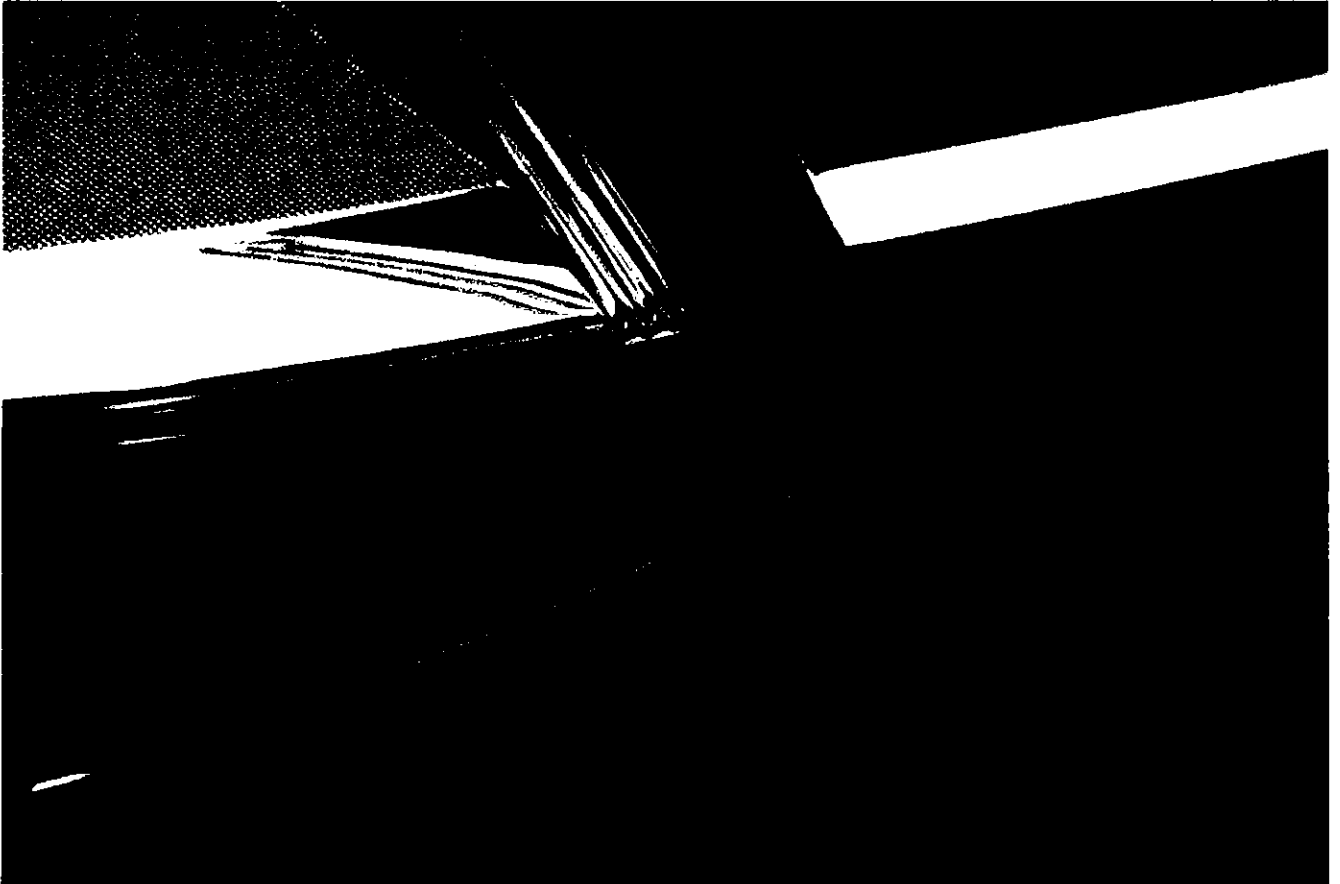
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